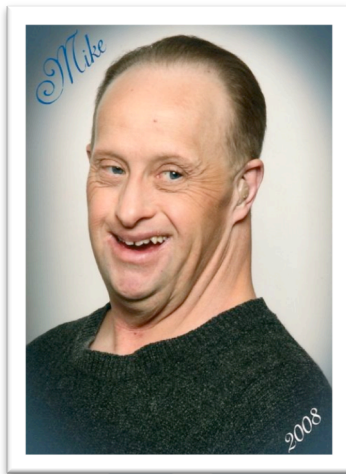


## MEDICAID, SOCIAL SECURITY, & SSI

*for People with Intellectual & Developmental Disabilities*



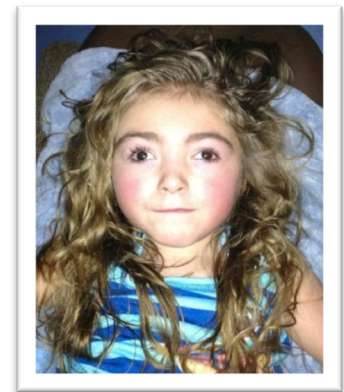
**Michael (Mike) Luken** is a 53 year old man with Down syndrome who lives in **Indiana**. He has been living in a group home since 1982 after both of his parents passed away.

Michael receives **Social Security** in addition to **Medicaid** long term services and supports. These programs provide him with a place to live and assistance with many basic activities of daily living, such as communicating, preparing meals, taking medications, and getting around in the community. They are used to pay for in-home support staff, transportation, and job placement and coaching services in addition to food, clothing, and incidental expenses. For instance, Medicaid helped Mike secure a part-time job sorting mail, which he loves.

Social Security and Medicaid are a lifeline for Mike as they provide him with needed support, stability, and opportunities to participate in community activities. If not for these programs, Michael would likely become homeless.

**Andrea Capaldo** is a 5 year old with a severe form of epilepsy - infantile spasms - who lives with her parents in **Iowa**. Infantile spasms is one of the “catastrophic childhood epilepsies” because of the difficulty in controlling seizures which cause brain injury. Andrea is now nonverbal, nonmobile, and needs to be fed through a G-tube.

**Medicaid** provides many essential services that help the Capaldos to keep Andrea at home instead of an institution. These include in-home nursing care, medical equipment, assistive technology, transportation, and physical therapies for Andrea as well as occasional respite care for her parents.



According to Andrea’s mother, “nursing, equipment, medicine is all keeping her going. Medicaid is a matter of life or early death.”



**Emily Garwood** is a 31 year old woman from **Michigan** who has Cri du Chat Syndrome which causes significant mental and communication impairments.

Emily receives both **SSI** and **Medicaid**. SSI helps pay for her food, clothing, housing, utilities, doctor and dentist bills, and special items Emily needs on a daily basis.

Medicaid, on the other hand, helps pay for Emily's transportation and day program that she attends 5 days a week where she volunteers and does various activities

in her community. It also helps to pay respite services for her family. Without either of these programs, Emily's parents would have suffered financially, but, more importantly, Emily never would have had the everyday opportunities and experiences that have helped her to grow into a productive young woman.

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**Austin Dummer** is an 18 year old with Autism and hearing loss who lives with his mother and brother in **Oregon**. His disabilities limit his ability to problem solve and communicate effectively, make good choices when it comes to feeding himself, take medications as needed, and get around in the community safely.

Austin receives **SSI** and **Medicaid**. Austin's SSI is used to help pay for food, clothing, housing, utilities, dental bills, respite care, and assistive technology devices. Medicaid provides him with appropriate healthcare and assistance in becoming as self-sufficient as possible by learning independent living skills such as cooking basic meals and attending to his personal hygiene.

Without SSI or Medicaid, Austin's mother would be forced to quit her job.

